

S.T.A.R.T.

Tenets for Working with Families on Child Abuse and Neglect and Issues of Addiction

1. We acknowledge that addiction is a disease which requires abstinence. We support the recovery philosophy and understand that relapse may occur, requiring modified and/or intensified services.
2. We believe that the neglect and abuse of children is often associated with addiction. The potential for losing custody of their child may often be the key to bringing the parent into treatment.
3. We understand that since the other needs of the parent are often rooted in the addiction, the initial focus of services should be directed toward assessment and treatment of the addiction and co-occurring disorders.
4. We believe that a sober, supportive living environment is critical to the recovery process, and optimal child development.
5. We are aware that no one partner contains all the resources and expertise to respond adequately to the needs of the parent who is addicted and who has abused or neglected their children.
6. We are committed to modifying agency policies or procedures which may impede the family's cooperation with all service providers and we are committed to engaging with both family members and other service providers in all significant decision making.
7. We commit ourselves to working cooperatively together, and to consulting on important decisions with each other and with the parents, to develop and implement plans to meet each family member's individual needs.
8. We believe that keeping parents and children closely connected is an essential factor to enhance or preserve their relationship.
9. We believe that when a child must be removed from his family for protection, the child has the right to frequent visits to family during the parent's treatment.
10. We agree to work cooperatively toward a goal of reunification of the family and child as quickly as the child's protection can be assured. If the parent is unable to provide the child a safe and permanent home, consideration will be given to other permanency options.
11. We believe that both the family and the child have the right to continuity of health care services.
12. We are committed to creative approaches to child care, improving parenting skills, building family support systems, etc. for those who are willing to enter treatment.